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SUMMARY RECORD OF THE 545th MEETING

Held at the Palais des Nations, Geneva,
on Thursday, 27 May 1999, at 10 a.m.

Chairperson: Mrs. MBOI

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The meeting was called to order at 10 a.m.

CONSIDERATION OF REPORTS OF STATES PARTIES (agenda item 6) (continued)

Initial report of Benin (CRC/C/3/Add.52; HRI/CORE/1/Add.85; CRC/C/Q/BEN/1; CRC/C/A/BEN/1) (continued)

1. At the invitation of the Chairperson, the members of the delegation of Benin resumed their places at the Committee table.

2. Mrs. MOKHUANE, drawing attention to the high incidence of stunting and wasting, despite the fact that Benin was self-sufficient in staple foods, asked what programmes were in place to curb malnutrition and undernourishment which jeopardized the future of the rising generation. Were mothers educated in the value of a balanced diet based on local produce? If such programmes existed, what was the response to them? Expressing concern about the shortage of health practitioners, especially in rural areas, combined with the absence of any plans to increase human resources in the health sector and the lack of any performance benchmarks, she asked if any schemes focused on public health, community health or primary health care.

3. Ms. KOUMAKPAI (Benin) agreed that the maternal mortality rate in Benin was high (498 per 100,000 births in 1996). In order to address the main causes - difficulties in coping with complications during delivery, clandestine abortions and unassisted births - prenatal care was being promoted, and in 1998 the take-up among pregnant women had ben 80 per cent. At the same time, midwives were being trained to identify potential birth risks, so that expectant mothers could be carefully monitored by maternity units and village health centres. Well-equipped maternity units had been newly established and qualified staff were being recruited. A bill to repeal the 1920 abortion law was being steered through Parliament in an effort to cut the number of clandestine abortions.

4. The lack of health staff affected both the public and the private sector, because recruitment had been frozen since 1985 as a result of the country's structural adjustment programme. Doctors and nurses in the private sector preferred to work in the towns, which explained the dire shortage of health personnel in rural areas. Only 34 per cent of the population visited health centres, one third consulted traditional healers and one third resorted to self-medication. Efforts were being made to improve the services provided by health centres and train staff to be more patient-oriented. Collaboration with traditional healers was envisaged and the treatment they could dispense under a doctor's supervision was being redefined. In order to discourage self-medication, essential generic drugs were being made available at low cost in local health centres. A campaign was under way to improve the health of the under-fives and combat the main causes of morbidity and mortality in that age group.

5. Under the national anti-malaria campaign, which enjoyed the support of several international organizations, impregnated mosquito nets were made available throughout the country, health staff were trained to diagnose and treat malaria cases correctly and the population was given instruction in environmental hygiene. The anti-diarrhoeal diseases programme emphasized the

value of oral rehydration therapy. Measures to prevent malnutrition focused on breastfeeding and on counselling mothers when they brought their children to health centres for inoculation under the Expanded Vaccination Programme. During National Vaccination Days, vitamin A supplements were handed out in areas where the risk of deficiency in that vitamin was greatest. Flour enriched with iron and vitamin A was being manufactured in the country for children over the age of four months. All salt on sale in Benin was iodized, 80 per cent of it imported and 20 per cent produced in the country. Primary health care provision coupled with the vaccination programme had contributed to a fall in the infant and child mortality rate, but it was still high and much remained to be done in that area.

6. There had been 2,813 registered cases of HIV infection among children between 1985 and 1997, and 5 per cent of those affected had been under the age of five. More than 26,000 children had been orphaned by AIDS and 2,295 were estimated to have died of the disease up to December 1997. HIV infection called into question all the country's endeavours to reduce the infant mortality rate. Mental health was another cause of concern. The only psychiatric counselling centre and hospital were in Cotonou.

7. The National Programme of Action on behalf of Women and Children did not give special consideration to adolescents' specific difficulties with social integration, sexuality and finding work. A number of non-governmental organizations (NGOs) were collaborating with the Government to improve vocational training and a programme to assist craftsmen was being implemented, as were national job-creation schemes. Sex-related problems were dealt with under the AIDS and family planning programmes, so young people were involved in measures to prevent sexually transmitted diseases.

8. Turning to ways of encouraging girl's education, she said that one UNICEF-sponsored scheme provided assistance for women to send their daughters to school. Furthermore, a Ministry for Women's Affairs had been set up and the Government had opened girls' hostels to enable the daughters of poor families to attend school. All schools had sickbays were pupils could obtain treatment without prior authorization from their parents.

9. Two days a year were devoted to heightening public awareness of the rights of the disabled and the federation for the handicapped was committed to upholding its members' rights. Some NGOs organized sports competitions for that category of the population. Again, it was NGOs which arranged recreational activities for young people, but there were also television games programmes and Benin had a very active youth club movement.

10. She acknowledged that sexual abuse in school might discourage parents from giving their daughters a formal education. Some instances had been reported and the first case was being heard by a court. Generally speaking, however, that was a taboo subject.

11. Mrs. OUEDRAOGO asked what was being done to enable teenage mothers to continue their schooling. What steps had been taken to enable HIV-infected children to pursue their education without being subject to discriminatory

treatment? Were they accepted by schools? What arrangements had been made for quality control in private schools? Were there any plans to step up visits by school inspectors to private schools?

12. The CHAIRPERSON requested additional information about the bill on abortion and efforts to reduce the infant and maternal mortality rates by educating women. In that connection, she pointed out that, for cultural reasons, it was also vital to educate boys and men. She invited the members of the Committee to raise any further questions they might have about health and education and special protection measures.

13. Mrs. KARP wished to know what percentages of budgetary expenditure were devoted to primary and preventive health care and to rural as opposed to urban areas. She strongly emphasized the need for preventive care and emergency facilities in rural areas. Given that little use was made of contraception, she asked if, under the planned amendment of the 1920 law, very young teenage girls would be allowed to have abortions, since they would not be mature enough to look after their babies and their own future might be ruined. Why had the 1920 law prohibiting the use of contraceptives not been repealed? How many people staffed the hotline? Were they properly trained to deal with adolescent health problems? Were there local hotlines or just one central number? Had the national strategy on HIV/AIDS been formulated by a specific institution? Did children participate in the information campaign on the subject? Benin's efforts to promote girls' education were laudable, but she understood that schools which relied on the payment of fees were reluctant to admit girls. Was there a budgetary appropriation for girls' tuition fees or were schools left to handle the problem on their own? What measures had been taken to address disparities in school attendance and drop-out rates? Were there any children's leisure and recreation programmes?

14. Mr. DOEK, referring to paragraph 208 of the report and Benin's written reply to question 27 in the list of issues, asked how much discretion a juvenile judge had to detain a young person. What constituted a serious offence? How was a child at risk defined? Could minors be detained for up to six months before their trial? Were any specific statistics available on the number of children in pre-trial detention? In the light of paragraphs 208 and 209 of the report, he expressed grave misgivings about the quality of the prisons in which children were held and their treatment there. Had Benin considered the abolition of banning orders? How was the quality of treatment in minors' compounds controlled? Did the system of prison inspections provided for in the Code of Criminal Procedure apply to minors? Did article 557 of the Code of Criminal Procedure relating to solitary confinement apply to children? Lastly, he requested further information about the training of the members of the Brigade for the Protection of Minors. How were they and juvenile judges recruited, selected and trained?

15. Mr. RABAH said that he realized it was costly to place children in rehabilitation centres, but he wondered how they were treated in detention centres and prisons. According to his information, violence was used against some juvenile offenders.

16. Mrs. OUEDRAOGO said that trafficking in children was unfortunately still widely practised in the subregion, and much of that traffic was said to pass

through Benin, despite the existence of prohibitory legislation. She asked what steps were being taken to enforce the legislation, both nationally and at the subregional level in cooperation with neighbouring countries. It was true that Benin had strengthened its regulations on the illicit removal of children from the country, but broader measures were needed, such as raising parents' awareness of the problem.

17. As in most developing countries, begging was widespread and the Committee was concerned that there was no specific legislation against it, since the children involved were extremely vulnerable - they did not attend school and were exposed to drugs, violence and prostitution. The Committee recommended that Benin should look more closely at the issue in view of the social ills to which the practice gave rise.

18. She expressed surprise that there was no specific programme for adolescents. An integrated approach to the whole 0-18 age group would be desirable. Was that omission a consequence of the fact that the National Programme of Action on behalf of Women and Children placed more emphasis on girls than boys? Were there any plans to implement a programme for adolescents?

19. Mrs. KARP said that the Committee had been told of the existence of health information centres for children. However, the question was whether such centres could provide counselling, for which specialized youth workers were required. It was essential for counselling to be available to young people both within and outside the education system.

20. The fact that no information was available on abuse in schools was probably a reflection of neglect of that issue rather than an indication that there were no cases of such abuse. People might be afraid to complain or there might be taboos surrounding the subject. There should be an obligation to report abuse in schools, within the justice system and in the home, as society had to be made aware of the need to prevent abuse through education and law enforcement.

21. It was important for Benin to review, not so much the juvenile justice system itself, which seemed to be moving in the right direction, but the implementation of that system. In that regard, she welcomed the request for technical assistance sent by the Ministry of Justice to Defence for Children International (DCI). It was also important to build up a body of statistical data; the report lacked statistics on such matters as the number of children in detention, the offences they had committed and the duration of their sentences.

22. She shared her colleagues' view that an inability to trace a child's parents should not be grounds for pre-trial detention. It would seem rather to be an indication that the child should be taken into care. She wondered what specific discretion was enjoyed by juvenile judges and how they exercised that discretion in deciding whether to detain a child. It was not clear whether the juvenile court system operated throughout the country or only in certain areas. She asked what training the police received for dealing with juveniles and how children were treated under questioning - were parents or a friend allowed to be present to help prevent self-incrimination? She also

wondered whether investigators received special training aimed at ensuring that children were not victimized by the juvenile justice system as a whole. Information about police brutality in pre-trial detention centres had come to light and she wondered whether complaints were ever made and, if so, how they were dealt with. Was there any specific training that might prevent such brutality?

23. She asked whether there was any legislation on prison conditions and health in prison, or concerning family visits. Overcrowding was a problem and in some places parents were allowed to visit for only five minutes. Were there any guidelines on visits by external groups or NGOs? Were prisons obliged to admit such visitors and were children able to speak with them in private and complain without fear of reprisals?

24. Lastly, she asked if any studies existed showing whether commercial sexual exploitation of children was a problem in Benin and if there was a programme of action in that regard, in line with the Stockholm Declaration.

25. Mrs. MOKHUANE, referring to article 31 of the Convention, said that Benin's report mentioned rest and leisure only in a context of education and organized sport. Was there a policy to promote leisure in a family setting as well, particularly with reference to the idea of relatives taking over responsibility for a child during further education and training?

26. Referring to article 30 of the Convention, on minority rights, she pointed out that, although French was the official language in Benin, it was not spoken in rural areas. Was that not considered a handicap to children from rural areas, whose schooling was entirely in French?

27. In connection with article 28 of the Convention, she noted that, according to the report, equal access was being achieved at the primary level but was still very limited at secondary level. Was there a system of grants or bursaries, particularly for children from disadvantaged backgrounds? She wondered whether the number of female teachers in primary schools was being increased in order to provide role models for girls.

The meeting was suspended at 11.05 a.m. and resumed at 11.20 a.m.

28. Ms. KOUMAKPAÏ (Benin) said that, in universities and secondary schools, students were able to express their opinions and student representatives took part in university staff or faculty meetings. With regard to the quality of private education, she said that both private and public schools were visited by inspectors.

29. Teenage mothers were allowed to continue with their education after giving birth. HIV/AIDS was not yet a problem in schools, partly because 90 per cent of HIV-positive children died before the age of five and partly because such children presented no risk to their classmates and were not excluded from school. In any case, there was no obligation to give out information on the subject. Young people, particularly those in the 10 to 19 age group, were involved in anti-AIDS campaigns. The National AIDS Control Programme organized awareness sessions for both secondary school students and young workers.

30. A bill on reproductive health, which would effectively repeal the 1920 law prohibiting abortion, was facing challenges and a solution to the problem would have to await the adoption of the new Penal Code. Family planning programmes emphasized sex education in schools and the avoidance of teenage pregnancies. Contraception was available to girls, and AIDS education and sex education started in primary school.

31. With regard to education in child health, it had become clear that no progress would be made unless the entire family was involved. The emphasis was now, therefore, on "family health" rather than just "child health". Since 1990 the health budget had been growing steadily. It was difficult to state the exact shares of the urban and rural sectors in the budget, but in rural areas the sale of basic medicines brought in sufficient income to cover some of the expenditures on community health centres. No national programme on adolescent health was envisaged because, for health purposes, young people were considered to be children up to the age of 15 and adults after that age. However, it had become clear that the 15-19 age group had special problems and a reform of reproductive health programmes was under way.

32. Mrs. SODJIEDO-HOUNTON (Benin) said that pre-trial proceedings in the juvenile justice system were held in camera and children could be assisted by their parent or guardian, or by any other person who could help them not to incriminate themselves. There appeared to be some misunderstanding about the concept of pre-trial detention. During preliminary inquiries at the police station, children had not actually entered the justice system, and the Listening and Guidance Centre (CEO) took responsibility for them. With regard to judges' discretion to send a child to prison, judges were assisted at all stages by educators, social workers and, where possible, parents. They did not therefore have complete discretion and no decision could be taken by the juvenile court without a preliminary inquiry ordered by the judge, which had to be taken into account by the social services.

33. Replying to a question from the Chairperson, she explained that children under the age of 13 could not be imprisoned because they were not legally responsible for their actions. Those in the 13-18 age group could be made subject to only half the penalty applicable to someone aged over 18. Children could not be placed in solitary confinement.

34. In three of the eight jurisdictions in Benin, no children were currently being held in detention, while between one and nine were being held in the others. The hotline number (16) could be used to report any violations of children's rights to the police and it was intended to establish offices of the Brigade for the Protection of Minors in departments other than Cotonou only. There was a problem of both material and human resources (the Brigade currently had only four members). The Brigade occupied a small office in the police department and more space would be needed for specialized reception centres.

35. The question of five-minute family visits to minors in prison was a practical problem arising from overcrowding. Many solutions had been tried, but without great success. She said that her Ministry visited prisons to inspect their procedures and to speak to children.

36. Many claims had been made about the sexual exploitation of children in Benin, but as yet no hard evidence had been brought forward. The Ministry of Justice was organizing a meeting, to be held in July 1999, to ascertain whether that phenomenon existed, and if so, to what extent.

37. Begging was indeed against the law in Benin. Its prevalence was, however, a cultural and religious phenomenon: Benin had a growing Islamic population, and children enrolled in Koranic studies were expected to beg on behalf of their teachers. In addition, disabled persons begged in the street because they had no other means of survival. Many beggars came to Benin from neighbouring countries, and gangs of child beggars roamed the streets. The Government had requested teachers in Koranic studies to cease the practice of asking their pupils to beg. It had also sent beggars home; often, however, such persons returned by another route.

38. Benin had formulated a draft law on the traffic in children. Two regional seminars had been organized to discuss the recruitment of young girls as maids. In addition, UNICEF had sponsored a seminar to discuss the campaign against the traffic in children throughout Africa. Traffickers in children sometimes worked in cartels: the question arose whether parents sold their children for money, or were tricked by traffickers into believing that their children were being sent off to work, or whether traffickers corrupted the children themselves.

39. Mr. GNONLONFOUN (Benin) said he was satisfied that the Government was doing everything possible to guarantee an adequate juvenile justice system, but more resources were obviously needed. The Brigade for the Protection of Minors was made up of one police commissioner and three inspectors. Unfortunately, Government recruitment in 1999 was limited to the health and education sectors, excluding police officers.

40. Benin had inherited its budgetary structure from France; regrettably, therefore, expenditures were not broken down according to such categories as children and adults, or rural and urban areas. All eight detention centres in Benin had separate wards for women and children.

41. With regard to the matter of begging, he said that the authorities had sometimes rounded up whole families of beggars along the highways and escorted them to the border. However, that practice had caused difficulties with neighbouring countries where begging was not illegal, and which had protested the expulsion from Benin of persons who had not committed crimes. Since countries of the subregion were entitled to the free movement of goods and person within the framework of the Economic Community of West African States (ECOWAS), a solution to that problem must be sought through diplomatic channels.

42. Children in difficult circumstances were kept in custody during the preliminary hearing, under the care of such NGOs as "Terre des hommes" and the "Enfants en situation difficile" project; both their age and the gravity of the offence were taken into account. In some prisons, parents had visited their children so often that it had been necessary to instruct warders to restrict the length of visits, with a view to allowing detained children the time to participate in educational and apprenticeship programmes.

43. Although French was the official language in Benin, local radio stations produced broadcasts in 31 tribal languages. "Majority" and "minority" were alien concepts.

44. The sexual abuse of children was not unknown in Benin: a handful of cases had been reported. It was the responsibility of parents to bring such incidents to the attention of the police.

45. Since Benin was involved in a structural adjustment programme that entailed economic constraints, leisure activity was naturally not one of its priorities. Although the Government sponsored events for children during the major holidays, for the most part that was the responsibility of NGOs.

46. The Government was indeed seeking means of redressing regional inequities in the provision of education. In some regions, the illiteracy rate was close to 70 per cent; in others, it was as low as 30 per cent. Although children in primary schools were taught in their various tribal languages, such programmes had not yet been introduced at the secondary level. Literacy sessions were conducted in tribal languages.

47. Mrs. KARP asked whether Benin had considered requesting an NGO to set up and staff a telephone hotline for children. She questioned whether police headquarters and a Brigade for the Protection of Minors were the appropriate structures for such a service. Many people, children included, were afraid to contact the police, and children posed questions that police officers were probably unequipped to answer. Many countries required individuals to report cases of sexual abuse, but permitted them to appeal to care institutions rather than to the police: that approach allowed sexual abuse to be treated as a family problem rather than a criminal offence. What measures had the Government taken to combat police brutality?

48. She inquired whether children who took drugs were prosecuted in the courts, or subject to such alternative measures as rehabilitation programmes. Had the Government considered establishing a system of financial incentives to encourage schools to increase the enrolment of girls?

49. Finally, she was troubled by the existence of regional inequities in Benin's juvenile justice system, caused by an imbalance in the provision of resources. What minimum educational standards, for instance, obtained in detention centres?

50. Mr. RABAH asked whether the juvenile justice system provided for alternatives to imprisonment, such as placement with substitute families or the payment of compensation to victims.

51. Mrs. OUEDRAOGO asked whether, in the view of the Government, the lack of access to drinking water and sanitation facilities affected the health of children, and concomitantly, the right to health. It would be useful to know what health and education problems, if any, resulted from the permeability of borders. What problems had the Government encountered with regard to the naturalization of persons who settled near borders?

52. Mrs. EL GUINDI inquired what measures, if any, the Government had taken to promote the physical and psychological rehabilitation of refugee children.

53. Mr. FULCI, observing that the Labour Code forbade compulsory labour by children, inquired whether the Government had taken measures to warn parents about the recruitment of their children into farm labour. Had Benin considered adopting the Convention concerning the Minimum Age for Admission to Employment (ILO Convention No. 138)?

54. He had heard rumours that agents recruited Beninese children from rural areas and sold them for pornography and into prostitution, on the pretext that they were sending them abroad to be educated. He asked whether those claims were true and, if so, whether the Government had taken measures to warn parents.

55. Ms. KARP asked whether Nigerian refugee children, who spoke English, were able to continue their education in French-speaking Benin.

56. Mr. GNONLONFOUN (Benin) said that there were no Nigerian refugees left in Benin, a fact partly attributable to the changing political climate in Nigeria. That being said, refugees rarely encountered significant linguistic problems in Benin because they spoke the same African languages as Beninese nationals.

57. It was important to bear in mind that children were not obliged to use the Government-sponsored hotline; they could equally well turn to non-governmental organizations for help. Second, prevention of child abuse came within the jurisdiction of the police force, which had an obligation to investigate and prosecute offenders. It also had the power to refer cases to the social services. On the matter of rehabilitation for drug offenders, there was a dedicated centre in the capital which had a special section catering to the needs of young people. Children were placed in the centre solely for rehabilitation purposes.

58. It was true that, in the past, some schools had turned away girl children, but the problem had now become less acute. In some cases, non-governmental organizations had provided girls with textbooks and paid their school fees to encourage them to stay at school.

59. There was no special State-run programme to eradicate police brutality, but officers accused of such excesses could expect to face the full force of the law. A number of officers had in fact been tried for brutality. The shortage of juvenile judges in the courts was offset to a certain extent by the work of a number of investigating judges who had been specially trained to deal with juvenile cases. No special medical training had been provided for persons coming into contact with juvenile offenders, but there was a qualified medical team in every detention centre. Children were never given custodial sentences for first offences, and, in general, imprisonment was always used as a last resort.

60. The authorities had made considerable efforts to link particularly isolated communities with the rest of the country, and as a result physically isolated villages often had better drinking water and educational facilities than more accessible areas. It was true that Benin's borders were highly permeable, and furthermore the country was obliged to live in the shadow of its giant neighbour Nigeria. Beninese nationals could cross freely into

neighbouring countries, where similarity of customs ensured that they could live and work without problems. The Government had nevertheless opened a special centre for refugees.

61. The Government was aware of the economic and sexual exploitation of children, and was monitoring the situation closely. A major international investigation was being conducted and the matter was currently sub judice, and so it would be inopportune to divulge further details in a public meeting. That being said, efforts had indeed been made to raise awareness of the problem among Beninese citizens at home and abroad.

62. The CHAIRPERSON said that the State party should provide supplementary information about the economic and sexual exploitation of Beninese children at an appropriate time.

63. Mrs. MOKHUANE said she had been encouraged to learn that Beninese domestic law had been brought into conformity with the Convention; that international law took precedence over domestic law, and domestic law over customary law; that Benin was a party to other human rights instruments; that a Committee for Human Rights had been established; and that efforts had been made to familiarize children with the Convention. The Committee also welcomed the limited yet significant progress that had been made in the fields of education and health care. While the Committee appreciated the limitations and constraints which the structural adjustment programme had imposed on the Beninese Government, it nevertheless wished to remind the State party that ratification of the Convention imposed an obligation to protect and promote children's rights as comprehensively as possible. Some of the areas requiring priority attention were the low development rate, the high illiteracy rate, poor environmental health, the high school drop-out rate, the lack of a precise definition of the child, uneven access to health care and poor quality of medical treatment, insufficient mental health provision, wide disparities between urban and rural areas, and inadequate leisure provision. Special attention should be given to improving the lot of the girl child.

64. Mrs. OUEDRAOGO said that the Beninese authorities had managed to do a lot with very little. The exemption of girls from tuition fees and the children's hotline were two noteworthy success stories. Nevertheless, greater efforts should be made to encourage the dissemination of the Convention and provide specialized training for police officers.

65. Mrs. KARP urged the State party to implement article 4 of the Convention, which provided for the undertaking of legislative, administrative and other measures to the maximum extent of available resources. Greater efforts should also be made to eliminate inconsistencies between customary and positive law. In addition, disaggregated statistical data should be supplied on children aged between 15 and 18, since the report was largely silent on the problems peculiar to adolescents. Finally, the Beninese Government should go beyond the protection of rights and focus on participation, empowerment, and an enhanced profile for children in Beninese society.

66. Mr. GNONLONFOUN (Benin) said that the Committee's comments had been most valuable. His Government intended to digest them and continue its dialogue with the Committee in the future.

The meeting rose at 1.10 p.m.